

The Dima Lab - LBD and Parkinson's Disease

Version 1.0

Module 1: Early Signs of Lewy Body Dementia

Experience visual disturbances and change in motor function, visualize the changes in the brain that cause parkinsonian symptoms.

Learning Objectives

- Recognize early warning signs of Parkinson's Disease (PD) and Lewy Body Dementia (LBD).
- Implement strategies to successfully support elders experiencing visual disturbances and inconsistent motor functioning.
- Understand differences between Alzheimer's and Lewy Body Dementia and customize care approach to support each individual.

Discussion Questions

- 1. How did you feel while embodying Dima?
 - a. Why did you feel that way?
- 2. What early symptoms did you experience?
 - a. Did any of these take you by surprise?
 - b. Which ones seemed especially challenging for your family to cope with?
- 3. What is something you could do to alleviate anxiety for someone with LBD?
- 4. What self-care tasks will likely become more difficult for someone with LBD/PD?
 - a. What strategies could you use to support them in maintaining independence?



External Resources

Non-Embodied Labs informative links and activities

Who is Dima?



Dima is a Lebanese-American woman who emigrated to America with her husband as a young adult. Dima and her husband operated a bakery together for several decades. Now retired, she lives with her oldest son his wife, and her two grandchildren.

People You'll Meet



Bassam is Dima's son. He runs the family bakery with his wife, Isabel, and would do anything for his mom.



Isabel is Bassam's wife and is currently expecting their third child. She is stretched thin caring for the children, working at the bakery, and now caring for Dima all while in the third trimester of her pregnancy.



Yusuf is Dima's grandson. He is a sweet boy with lots of energy and loves having Dima live with them.



Laila is Dima's granddaughter. She is the youngest of the family and looks up to her brother, Yusuf.



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Module 2: Progression of Lewy Body Dementia

Experience visual and auditory hallucinations. Learn coping skills that preserve dignity and reduce anxiety, attend a doctor's appointment with your family.

Learning Objectives

- Understand the importance of routine and consistency for people living with LBD.
- Identify and implement strategies to promote independence and preserve the dignity of elders living with LBD.
- Proactively manage the elder's environment to reduce the risk of over-stimulation.

Discussion Questions

- 1. Why do you think earplugs are a helpful tool for those living with LBD?
 - a. What other self-regulating techniques could be effective?
- 2. What do you think triggered the hallucinations in the living room?
 - a. Think of a time when an elder with LBD experienced similar behavioral manifestations?
 - i. Do you recall what the physical environment was like?
 - ii. What could've been done to possibly prevent this occurrence?
- 3. How did you feel when your daughter-in-law said you "attacked them"?
 - a. After embodying Dima, has your perception of behavioral manifestations changed?
- 4. How did you feel when the doctor was suggesting a plan for long-term placement?
 - a. How could the doctor have included you more in the conversation?



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Dr. Helton is Dima's neurologist. She is following Dima's Parkinson's disease progression and assisting the family in identifying resources to support her changing needs.



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Module 3: Transitioning to a Care Facility

Experience moving into a long-term care facility and adjusting to a congregate living environment. Receive care and support from facility staff.

Learning Objectives

- Provide culturally competent care by prioritizing elder preferences and honoring dietary restrictions.
- Support families through the transition process by communicating effectively with family members and elder to build relationships and provide reassurance.
- Identify situations which may cause over-stimulation and support elder in preserving dignity.

Discussion Questions

- 1. How did you feel when you arrived at the care facility? Why did you feel that way?
- 2. What are best practices for a care community to support a resident who is new, particularly in the first 24 hours?
 - a. After embodying Dima, what is one thing you are going to do differently when welcoming a new resident?
- 3. What are some of the unique aspects of a person with LBD and PD adjusting to community care?
- 4. What are best practices for a care community to support a family during the initial intake and transition process?
 - a. How often does your facility communicate with families during the first week?
 - i. After embodying Dima, is there anything you would change about your facility's current admission process?



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Alexis is the nurse case manager at Dima's care community.



John is a nurse working at Dima's care community.